

A PHI Company

DELAWARE LEVEL 1 INTERCONNECTION APPLICATION/AGREEMENT

With Terms and Conditions for Interconnection (Lab Certified Inverter-Based Small Generator Facilities Less than or Equal to 10 kW)

The Green Power Connection™ Team

Delmarva Power

A PHI Company

(866) 634-5571 - Phone

gpc-north@pepcoholdings.com

(Send applications via Email or Mail to Delmarva Power, GPC Team)

Mailing Address: 5 Collins Drive, Mail Stop 84CP22, Carneys Point, NJ 08069

Page 1 July 2015



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PART 1

DELAWARE LEVEL 1 INTERCONNECTION APPLICATION & AGREEMENT

With Terms and Conditions for Interconnection (Lab Certified Inverter-Based Small Generator Facilities Less than or Equal to 10 kW)

(Application & Conditional Agreement – to be completed prior to installation)

INTERCONNECTION CUSTOMER CONTACT INFORMATION

Customer Name: Cythia Flynn				
Mailing Address: 2315 Macdonough Rd	1			
		Zip Code: 19805		
Contact Person/Authorized Agent	State: DE t (If other than above): Deirare	2 Boyle		
Mailing Address (If other than above):		<u> </u>		
Telephone (Daytime): 302-588-3257	(Evening):			
Fax Number: E-N	Fax Number: E-Mail Address (Required):FlynnBoyle@comcast.net			
	mation: (if different from Customer-Gene			
Alternate Name:				
Mailing Address:				
City:	State:	Zip Code:		
	(Evening):			
Fax Number: E-N	Mail Address:			
If an email is provided for your alternate co	ontact, that contact will receive all email con	munications.		
FACILITY INFORMATION				
Facility Address: 98 Glade Cir W # LT	75			
City: Rehoboth Beach	State: DE Z	Zip Code: 19971		
	Meter #:			
Current Annual Energy Consump	otion (optional): 5900 kWh			
Check if this Facility (building) is,	or is going to be, NEW CONSTRU	JCTION: 🗌		
Estimated Commissioning Date:	11/25/17			
Energy Source: Solar PV	Prime Mover	- Photovoltaics		

Page 2 July 2015

Type of Application: Initial	Addition/Upgrade 1			
Initial Rating:	DC Generator Total ² Nameplate Rating: 4.96 (kW), AC Inverter Total ³ Rating 3.8 (kW), AC System Design Total Capacity ⁴ : 3.8 (kW) 3800 (kVA)			
Added Rating (if upgrade):	DC Generator Total Nameplate Rating: (kW), AC Inverter Total Rating (kW), AC System Design Total Capacity: (kW) (kVA)			
Total Rating (if upgrade):	DC Generator Total Nameplate Rating: (kW), AC Inverter Total Rating (kW), AC System Design Total Capacity: (kW) (kVA)			
Generator (or PV Panel) Ma	anufacturer, Model # ⁵ : LG NEON 310w			
A copy of Generator nameplate and	d Manufacturer's Specification Sheet may also be submitted			
Number of Generators (or F	V Panels): 16			
<i>7</i> 1	ed Single Axis Double Axis			
Array Azimuth if PV: 231	° Array Tilt if PV: 35			
Shading Angles if PV at E, 120°,150°,S,210°,240°,W:° (Separate with comas)				
Inverter Manufacturer ⁶ : From	Model Number(s) of Inverter ⁷ : PRIMO			
Number of Inverters ⁸ : 1	_Inverter Type: <u>Forced Commutated </u>			
Ampere Rating: 15.83 Amp	os _{AC,} Number of Phases: ■ 1 ☐ 3			
Nominal Voltage Rating: 24	V_{AC} , Nominal DC Voltage: $\frac{324}{}$ V_{BC}			
Power Factor: 100 %,	Frequency: 60 Hz, Efficiency:96 (%)			
	ccessible Disconnect ⁹ : Yes No,			
If Yes, Location:				
One-line Diagram Attached	(Required): ■ Yes			
Site Plan Attached (Required)	y: ■ Yes □ No			
Do you plan to export power	r? ¹⁰ Tyes No, If Yes, Estimated Maximum: 3 kW _{AC}			
Estimated Gross Annual Er	nergy Production: 6173 kWh			
Is the inverter IEEE/UL174' (If yes, attach manufacturer's cut si 1741 listing. If no, facility is not elig	1 lab certified? Yes No Lheet showing listing and label information from the appropriate listing authority, e.g. UL pible for Level 1 Application.)			
 Sum of all generators or PV Pane Sum of all inverters This will be your system desig If more than one type, please If more than one manufacture If more than one model number 	n capacity based upon your unique system variables. list all manufactures and model numbers. , please list all. er, please list all.			
⁸ Attach additional sheets as neces ⁹ This is strongly recommended by	sary in the event of multiple inverters of various types/sizes the utility. Best practice is to have an externally accessible, lockable, disconnect with			

visible open/close connection and to have appropriate signage on the disconnect, such as 'Solar PV AC Disconnect' (preferably red) and on the meter housing 'Caution, Solar Electric System" (preferably yellow). If the disconnect is not in the immediate vicinity of the meter, please include the disconnect location on the meter signage. This enables the utility and first responders to more quickly deal with an emergency situation.

10 Yes, if your expected maximum output of the inverter (kW AC) is greater than the lowest load you anticipate at your facility during maximum PV output (kW). The difference would be the amount you may export.

	RACTOR Owner (Customer) Installed: Yes No
Contractor Name: Alutech United Inc	
Mailing Address: 117 Dixon St	
	State: DE Zip Code: 19975
Telephone (Daytime): 800-233-1144	
	Address (Required): Haleigh@Greenstreetsolar.com
ELECTRICAL CONTRACTOR	
Electrical Contractor Name: Alutech United	ed Inc
Mailing Address: 117 Dixon St	
City: Selbyville	State: DE Zip Code: 19975
Telephone (Daytime): 800-233-1144	(Evening): 302-841-9059
Telephone (Daytime): 800-233-1144 Fax Number: 302-436-5100	E-Mail Address: 302-841-9059
License number: T1-0005686	Active License? Yes ■ No 🗌
INSURANCE DISCLOSURE	
	ly considered by the interconnection customer. equired to obtain general liability insurance
customer is advised to consider obtaininterconnection customer's potential lia	ning appropriate insurance coverage to cover the
customer is advised to consider obtaining interconnection customer's potential lian CUSTOMER SIGNATURE I hereby certify that: 1) I have read and hereto by reference and are a part of the attached terms and conditions; and 3) in this application request form is compared to the control of the customer	ning appropriate insurance coverage to cover the
customer is advised to consider obtaininterconnection customer's potential liase. CUSTOMER SIGNATURE I hereby certify that: 1) I have read and hereto by reference and are a part of the attached terms and conditions; and 3) in this application request form is compinterconnecting utility to exchange informapplication applies.	ning appropriate insurance coverage to cover the ability under this agreement. d understand the terms and conditions which are attache this Agreement; 2) I hereby agree to comply with the to the best of my knowledge, all of the information provide plete and true. I consent to permit the PSC and

Page 4 July 2015



DELAWARE INTERCONNECTION APPLICATION & AGREEMENT

With Terms and Conditions for Interconnection (Lab Certified Inverter-Based Small Generator Facilities Less than or Equal to 10 kW)

(Final Agreement - must be completed after installation and prior to interconnection)

Certificate of Completion¹¹

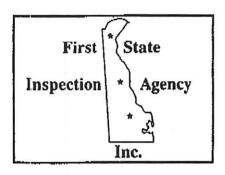
INTERCONNECTION CUSTOMER CONTACT INFORMATION

Customer Name:	Cynthia Flynn				
Mailing Address:	2315 Macdonough Rd				
City: Wilmington	State	e: <u>DE</u>	Zip Code:	19805	
	me): <u>302-588-3257</u>				
Fax Number:		E-Mail Address	FlynnBoyle@com	cast.net	
FACILITY INFOR	MATION				
Facility Address:	98 Glade Circle West				
-		tate: DE	Zin Code:	19971	
	S				
DPL Account #: 5	500 5832 278	Meter #	:	 .	
Energy Source: 5	Solar PV	Prime	e Mover: Photovo	oltaics	Y
Inverter Type: Forced Commutated Line Commutated					
Number of Invert	ers: 1				
Inverter Manufac	cturer: Fronius	Model Number(s) of Inverter:	PRIMO 3.8	
Rating	AC Inverter To	[·] Total ¹² Namepla otal ¹³ Rating ^{3.8} esign Total Capa	(kW),	(kW), (kW) 3800 (kVA)	
Generator (or PV	Panel) Manufacturer, Mo	odel # ¹⁵ : <u>LG 310w N</u>	NEON 2		

Information entered here on Certificate of Completion (Part 2) must match part 1
Sum of all generators or PV Panels
Sum of all inverters
This will be your system design capacity based upon your unique system variables.
If more than one type, please list all manufactures and model numbers.

EQUIPMENT INSTALLATION CONTRAC	TOR Owner (Customer) Installed: Yes
Contractor Name: Alutech United Inc	
Mailing Address: 117 Dixons st	
City: Selbyville	State: DE Zip Code: 19975
Telephone (Daytime): 800-233-1144	(Evening): 302-841-9059
Telephone (Daytime): 800-233-1144 Fax Number: 302-436-5100	E-Mail Address: Haleigh@greenstreetsolar.com
FINAL ELECTRIC INSPECTION AND INT	ERCONNECTION CUSTOMER SIGNATURE
having jurisdiction. A signed copy of the eleattached. The Interconnection Customer at Generator Facility until receipt of the final a below.	' <u></u>
ACCEPTANCE AND FINAL APPROVAL I	FOR INTERCONNECTION (for EDC use only)
The interconnection agreement is approved interconnected operation upon the signing a	d and the Small Generator Facility is approved for and return of this Certificate of Completion by EDC:
	ess Test? (Initial) Yes (_LH) No () est: Passed: (Initial) ()
EDC Signature:	Date:
Printed Name:Lakeisha Harris	

Page 10 July 2015



Alutech United, Inc. James Rodrigue PO Box 329 Selbyville, DE 19975 First State Inspection Agency, Inc. 1001 Mattlind Way Milford, DE 19963

> 1-800-468-7338 302-422-3859

CERTIFICATE

Final Inspection Date:

Application #:

Owner:

Occupancy:

Location:

04 153

CynthaFlynn

4.96 KW Solar Array

98 Glade Circle West, The Glades Rehoboth Beach, Sussex Co., DE

This certifies that the installation of electrical equipment listed on referenced application has been approved as meeting the requirements of the National Electric Code, utility municipalities and Agency rules. Any modification, addition or alteration of the electrical system, after the date of final inspection, will require a new application for inspections and certifications.

Chief Electrical Inspector

F.S. CERT